MULTIPLE DEPEN NT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

1075205

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED IND. DEP.		AFTER		AFTER	
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TOTAL CLAIMS	12		13	47	4	
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TOTAL CLAIMS		3.6					

PTO - 1360 (REV. 11/04)

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